

## **APPLICATION FORM**

Affix Passport Size Photograph duly attested

## M PHIL. IN CLINICAL PSYCHOLOGY UNIVERSITY OF CALCUTTA UNIVERSITYCOLLEGE OF SCIENCE, TECHNOLOGY AND AGRICULTURE

To

The Secretar	y									
Faculty Cour	ncils for F	.G. Studio	es in Sc.	, Tech.&l	Engg and	Ag.	& Vet. Sc.			
CalcuttaUniv										
92, A.P.C. R	oad, Kolk	cata – 700	009							
Name of the	Applican	t (in block	(letters)	:						
M.A. / M.Sc										
College and	Universit	y:								
College and University: Year of passing: Year of passing:										
Applied for admission in Course:										
11			ubject:							
Subject: Whether admitted earlier in this course, give details:										
Date of birth	•		Who	thar amn	loved:					
Category:			SC		г — Т			ORC A	ОВС	R
Category.	GEN		<b>вс</b>			1		ODC AL	ОВС	ь
Statement of	marks in	MA/M.S	c. exami	nation:						
Examination	Semester	SGPA	CGPA		marks	Tot	tal marks of	Class/Div.		
	/ Part			obta	ained		exam		of ma	rks
	I									
	II									
	III									
	IV									
	V									
	VI									
	VII									
	VIII									
Statement of	marks in	the follow	ving Exa	amination	ıs:					
Examination Board/ Ye				Year of				Grade/	Class	%
		Univer	sity	passing	obtaine	ed	of exam.	GP	/Div.	of marks
Madhyamik or equiv. (10)										
HS or equivalent										
(10+2)										
B.Sc.(Hons.)										
(10+2+3)										
Other Qualific	cations									

Details of the Bank Draft (submitted along with this application form): (DD in favour of M. Phil in Clinical Psychology, C. U., payable at Kolkata)

## UNIVERSITYCOLLEGE OF SCIENCE, TECHNOLOGY AND AGRICULTURE

2. CalcuttaUniversity Registration No.(for C.U.Students). 3. Present address (if any).  Telephone No	1.	Name of the applicant (in block	k letters)						
Telephone No	2.	CalcuttaUniversity Registration	on No.(for C.U.Studen	ıts)					
Telephone No	3.	Present address (if any)							
Telephone No. Mobile									
Telephone No									
Telephone No.  5. Nationality Domicile state  6. Male / Female		•							
5. Nationality	4.	Permanent address							
5. Nationality									
5. Nationality Domicile state 6. Male / Female									
6. Male / Female					•				
8. Father's Name									
9. Mother's Name Occupation Monthly Income 10. Husband's /Wife's name Occupation Monthly Income 11. Guardian's name, relationship and occupation									
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11. Guardian's name, relationship and occupation  12. Income of the family per month  13. Are you enjoying any scholarship or stipend (if yes, state the name of the sponsor):  14. Details of employment (if employed)  DECLARATION / UNDERTAKING  I do here by declare / undertake that the statements made above by me are true. If any error/misinformation is detected at my provisional admission, my admission shall be treated as cancelled. I have not taken admission nor shall I take admiss to any other course during my studies in this University without intimation. If I get admission I will be a full time student this University. I am aware that, as per RCI guidelines for M.Phil in Clinical Psychology (2009) minimum attendance of 8t (in the academic year) shall be necessary for taking the respective examination (Part I or Part II).  Endorsed  Signature of father/mother/husband/guardian  Signature of the applicant				•	-				
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		Endorsed							
		Signature of father/mother/hus	sband/guardian		Signature of the applicant				
Date		<i>5</i>			3 rrr				
Date									
Dut		Date			Date				
		~ www							

## N.B.

- 1. Application must be accompanied self-attested copies of all relevant Mark Sheets and Certificates as applicable
- 2. For Sponsored candidates Employer Certificate must be attached to the application form
- 3. All documents and photo submitted must be signed by the candidate himself/herself.
- 4. Incomplete Forms are liable to be rejected.